

WV Developmental Disabilities Council
110 Stockton Street
Charleston, WV 25387
Phone: (304) 558-0416 TDD: (304) 558-2376 Fax: (304) 558-0941
www.ddc.wv.gov

RETURN NO LATER THAN April 1, 2013

The West Virginia Developmental Disabilities Council is soliciting interest for a limited number of new members to be appointed to the Council beginning July 1, 2013. **The Council is looking specifically for two individuals with developmental disabilities from the southern counties of WV, and one representative of a local and non-governmental agency or private nonprofit group concerned with services for individuals with developmental disabilities in WV.**

The Developmental Disabilities Council is a 32 member organization that was established by an Executive Order of the Governor on March 6, 1972. The Council is supported administratively by the Department of Health and Human Resources and is funded by a grant under the federal *Developmental Disabilities Assistance and Bill of Rights Act* (P.L. 106-402).

The Council's mission is to assure that West Virginians with developmental disabilities receive the services, supports and other forms of assistance they need to exercise self-determination and achieve independence, productivity, integration, and inclusion in the community.

The Council consists of citizens with developmental disabilities, family members and representatives from State and private organizations concerned with the provision of services to people with developmental disabilities. Over 60% are citizen members who are appointed by the Governor for terms of up to four years.

Developmental Disability **

A severe, chronic disability of an individual that-

A) is attributable to a mental or physical impairment, or combination of mental and physical impairments;

B) is manifested before the individual attains age 22;

C) is likely to continue indefinitely;

D) results in substantial functional limitations in 3 or more of the following areas of major life activity: (a)

Self-care. (b) Receptive and expressive language. (c) Learning.

(d) Mobility. (e) Self-direction. (f) Capacity for independent living. (g) Economic self-sufficiency; and

E) reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services, individualized supports, or other forms of assistance that are of lifelong or extended duration and are individually planned and coordinated.

Young Children

An individual from birth to age 9, inclusive, who has a substantial developmental delay or specific congenital or acquired condition, may be considered to have a developmental disability without meeting 3 or more of the criteria described in (D) (a) through (g) if the individual, without services and supports, has a high probability of meeting those criteria later in life.

- Definition

taken from P.L. 106-402

** In and of themselves, sensory impairments (e.g. blindness, deafness), learning disabilities, emotional disorders, mental health impairments, and many physical disabilities are not considered to be developmental disabilities.

WV DD COUNCIL MEMBERSHIP APPLICATION

If you fit the eligibility criteria and are interested in being considered for membership on the Council, please complete the following information. I am:

- ☐ a person with a developmental disability. Your age: _____ Please describe your disability. _____
_____ Age disability began: _____
- ☐ a parent or guardian of **a child** (under 18 years of age) with a developmental disability.
Child's age: _____ Please describe your child's disability. _____
_____ Age disability began: _____
- ☐ the immediate relative or guardian of **an adult** with a mentally impairing developmental disability that causes him/her great difficulty in advocating for him/herself. What is your relationship to the person? _____ Family member's age: _____
Please describe your family member's disability. _____
_____ Age disability began: _____
- ☐ a representative of a local and non-governmental agency or private non-profit group concerned with services for individuals with developmental disabilities in WV. Which agency or group do you represent? _____

Contact Information

Name	
Street Address	
City, Zip Code, County	
Phone (Day)	
Phone (Evening)	
E-mail Address	
Length of WV residency	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Ethnicity <i>(Needed to comply with our federal law)</i>	

What services are you or your family member currently receiving (employment, special education, respite, service coordination, personal assistance service, etc.)?

Please tell us something about your experiences and beliefs about people with developmental disabilities.

As a member of the WV DD Council, you would be looking at the “big picture” and finding solutions to problems affecting many people. What would an ideal service delivery system look like for children and adults with developmental disabilities and their families? _____

Tell us about your involvement and/or advocacy experiences with other organizations, boards, or other groups. _____

Please tell us why you are interested in becoming a Council member. _____

Please provide us with the names of three people we can contact for references.

<i>Name</i>	<i>Day Phone #</i>
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<i>Email</i>	<i>How the Person Knows You</i>
<hr/>	<hr/>
<i>Name</i>	<i>Day Phone #</i>
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<i>Name</i>	<i>Day Phone #</i>
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<i>Email</i>	<i>How the Person Knows You</i>
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- ☐ *If appointed, I agree to actively participate in the Council's regular quarterly meetings and workgroups. I agree to promote the independence, productivity, integration and full community inclusion of people with developmental disabilities. I also understand I must arrange for my own transportation in order to participate in the quarterly meetings.*

Signature

Date

Return this form by mail or fax to the WV Developmental Disabilities Council no later than *April 1, 2013*.

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*****If you need this application in an alternative format or you have any questions please contact the WV Developmental Disabilities Council. *****